


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # S83140 Entity Name K.E.I. CORP.	
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FILED
May 01, 2006 08:00 AM
Secretary of State

Principal Place of Business 4418 W SAN MIGUEL ST TAMPA, FL 33629	Mailing Address 4418 SAN MIGUEL ST. TAMPA, FL 33629 US
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04272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0300129	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**PEEBLES, JERRY
4418 W SAN MIGUEL ST
TAMPA, FL 33629**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PEEBLES, JERRY 4418 W SAN MIGUEL ST TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PEEBLES, MARY LOU 4418 W SAN MIGUEL ST TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEEBLES, KELLY C 4418 W SAN MIGUEL ST TAMPA, FL 33629
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05/17/06-80031-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mary L. Peebles 4/27/06 813-251-0127
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #